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The Considerated Appropriation Act, 2005 (FIR. 4814) Applicant in the Considerated Appropriation Act, 2005 (FIR. 1814) Filing Date		Effective on 12/08/2		Complete if Known					
First Named Invertor	Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).			Application Nur	0/809,152-Co)9,152-Conf. #7394			
First Named Invertor	FEE	ETRANSI	Filing Date	M	March 24, 2004				
Applicant claims small entity status, See 3t CFR 1.27				First Named Inv	ventor P	Patrick L. EDSON			
METHOD OF PAYMENT	FOR F Y 2008			Examiner Name	S	S. D. Alvesteffer			
Check	Applicant claims small entity status. See 37 CFR 1.27			Art Unit	t Unit 2173				
Check	TOTAL AMOUNT	OF PAYMENT	(\$) 1400.00	Attorney Docket	No. M	IWS-104RCE			
No popular Account Deposit Account Number 12-0-09 Deposit Account Name Lahive & Cockfleid, LLP	METHOD OF PAYMENT (check all that apply)								
For the above-Identified deposit account, the Director is hereby authorized to: (check all that apply) X Charge fee(s) indicated below, except for the filing fee X Charge any additional fee(s) or underpayments of the (e) X Credit arry overpayments X Credit arry	Check Credit Card Money Order None Other (please identify):								
Charge fee(s) indicated below. Charge fee(s) indicated below, except for the filling fee X Charge any additional fee(s) or underpayments of X Credit arry overpayments	X Deposit Account Deposit Account Number: 12-0080 Deposit Account Name: Lahive & Cockfield, LLP								
Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 x Credit any overpayments x Credi	For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)								
Tee(s) urder 37 CFR 1.16 and 1.17									
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Paper	FEE CALCULATION								
Multiple dependent claims over 3 (including Reissues) Multiple Dependent claims paid for, if greater than 20. Fee (\$) Fee (\$)	1. BASIC FILING, SEARCH, AND EXAMINATION FEES								
Mapplication Type		FII			EXAMINA				
Plant 210 105 100 50 130 65	Application Ty	ype <u>Fee (\$</u>			Fee (\$)		Fees Pai	id (\$ <u>)</u>	
Plant	Utility	310	155 510	255	210	105		7	
Reissue 310 155 510 255 620 310	Design	210	105 100	50	130	65			
Provisional 210 105 0 0 0 0 0	Plant	210	105 310	155	160	80			
Second Fee Second Fee Second	Reissue	310	155 510	255	620	310			
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Each independent claims over 3 (including Reissues) Multiple dependent claims Total Claims Extra Claims Total Claims Extra Claims Total Sheets Total Sheets Total Sheets Total Specification									
Multiple dependent claims Total Claims Extra Claims Fee (\$) Fee Paid (\$) Multiple Dependent Claims Fee (\$) Fee Paid (\$) HP = highest number of total claims paid for, if greater than 20. Indep. Claims Extra Claims Extra Claims Fee (\$) Fee Paid (\$) Sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$260 (\$130 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$) Fee Paid (\$) Fees Paid (\$) Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late filing surcharge): 1253 Extension for response within third month 590.00 1801 Request for continued examination (RCE) (see 37 810.00 SUBMITTED BY Signature // Kevin J. Canning/ Registration No. (Altorney/Agent) 35,470 Telephone (617) 994-0732	Each claim over 20 (including Reissues) 50 25								
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Indep. Claims Extra Claims Fee (\$) Fee Paid (\$) — x = HP = highest number of independent claims paid for, if greater than 3. 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$260 (\$130 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$) — 100 = — 50 = — (round up to a whole number) x = 4. OTHER FEE(\$) Fees Paid (\$) Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late filling surcharge): 1253 Extension for response within third month 1801 Request for continued examination (RCE) (see 37 810.00) SUBMITTED BY Signature /Kevin J. Canning/ Registration No. (Attorney/Agent) 35,470 Telephone (617) 994-0732	Total Claims	Cotal Claims Extra Claims Fee (\$) Fee		'aid (\$) Multip		<u>ltiple Depende</u>			
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	Signature	/Kevin J. Canning	/		35,470	Telephone	(617) 994-	0732	
	Name (Print/Type)	Kevin J. Canning	<u>, , , , , , , , , , , , , , , , , , , </u>		Date	May 1, 20	008		

I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being transmitted via the Office electronic filing system in accordance with § 1.6(a)(4).

Dated: May 1, 2008 Electronic Signature for Kevin J. Canning: /Kevin J. Canning/